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PTO/SB/21 (08-00)

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number Of Pages In This Submission

Application Number	09/622,703
Filing Date	August 21, 2000
First Named Inventor	Warren K. HOEFFLER
Group Art Unit	1634
Examiner Name	A. K. Chakrabarti
Total Number Of Pages In This Submission	72
Attorney Docket No.	506562000200

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ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) - 2pgs.	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Licensing-related Papers	<input checked="" type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) Appeal Brief (in triplicate) - 69pgs.
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declarations	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Postcard
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY OR AGENT

Firm or Individual Name	Cameron A. King, Reg. No. 41,897 Morrison & Foerster LLP 425 Market Street San Francisco, California 94105-2482
Signature	
Date	October 25, 2002

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FEE TRANSMITTAL FOR FY 2002



Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$160.00)

Complete if Known

Application Number	09/622,703
Filing Date	August 21, 2000
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METHOD OF PAYMENT

The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number: 03-1952

Deposit Account Name: Morrison & Foerster LLP

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit Card Money Order Other

FEE CALCULATION (continued)

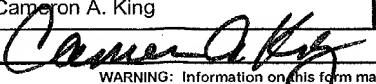
3. ADDITIONAL FEES

Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid
1051	130	205	65	Surcharge - late filing fee or oath	
1052	50	227	25	Surcharge - late provisional filing fee or cover sheet	
1053	130	139	130	Non-English specification	
1812	2,520	147	2,520	For filing a request for ex parte reexamination	
1804	920*	112	920*	Requesting publication of SIR prior to Examiner action	
1805	1,840*	113	1,840*	Requesting publication of SIR after Examiner action	
1251	110	215	55	Extension for reply within first month	
1252	400	216	200	Extension for reply within second month	
1253	920	217	460	Extension for reply within third month	
1254	1,440	218	720	Extension for reply within fourth month	
1255	1,960	228	980	Extension for reply within fifth month	
1401	320	219	160	Notice of Appeal	
1402	320	220	160	Filing a brief in support of an appeal	160.00
1403	280	221	140	Request for oral hearing	
1451	1,510	138	1,510	Petition to institute a public use proceeding	
1452	110	240	55	Petition to revive - unavoidable	
1453	1,280	241	640	Petition to revive - unintentional	
SUBTOTAL (1) (\$0)					
2. EXTRA CLAIM FEES					
Total Claims	* -20** =	Extra Claims	Fee from below	Fee Paid	
Independent Claims	-3** =	*	x	= \$	
Multiple Dependent				= \$	
SUBTOTAL (2) (\$0)					
* Reduced by Basic Filing Fee Paid					
SUBTOTAL (3) (\$160.00)					

** or number previously paid, if greater; For reissues, see above.

SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Cameron A. King	Registration No. (Attorney/Agent)	41,897	Telephone	(415) 268-6524
Signature				Date	October 25, 2002

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